

### **REMARKS**

Applicants have received and carefully reviewed the Final Office Action mailed March 24, 2004. Claims 121-132 are pending. Reconsideration, reexamination, and allowance of all pending claims are respectfully requested.

The Specification has been amended to correct minor informalities. No new matter has been added.

In paragraph 2 of the Final Office Action, claims 121, 122 and 129 were rejected under 35 U.S.C. §102(b) as being anticipated by Causey, III, in U.S. Patent No. 5,411,547. However, Applicants note that claim 121 recites providing a lead system for the stimulus device, the step of providing the lead system including a process resulting in implantation of the leads only to areas that are exclusive of the patient's heart. It does not appear to Applicants that Causey, III, provides any suggestion to implant the leads in this manner. More particularly, Causey, III, states:

The pulse generator 24 generates output stimulation pulses of low energy (antitach pulses), e.g., electrical pulses having an energy of less than 200 micro joules, as controlled by the control/timing circuit 22 and an antitach pacing circuit 23. Such antitach pulses are applied to a patient's heart 28 through a conventional pacing lead 30 having an electrode 32 in contact with the cardiac tissue (usually inside the right ventricle and/or right atrium).

(Column 6, line 63 thru column 7, line 3.) It appears from this passage that Causey, III, does not disclose, or even suggest, a step of providing a lead system including a process resulting in implantation of the leads only to areas that are exclusive of the patient's heart. Therefore claim 121, and dependent claims 122 and 129, are believed to be patentable over Causey, III.

In paragraph 4 of the Final Office Action, claim 125 was rejected under 35 U.S.C. §103(a) as being unpatentable over Causey, III, in view of Bardy, U.S. Patent No. 5,292,338. As noted above, Causey, III teaches conventional lead placement including a lead having an electrode in contact with the cardiac tissue. Bardy is only cited to illustrate placement of the canister of an implantable cardiac rhythm management device. Therefore it is believed that the Examiner has not stated a *prima facie* case with respect to claim 125, and so claim 125 should be allowed.

In paragraph 5 of the Final Office Action, claims 123, 124, and 126-128 were objected to as being dependent upon rejected base claims, but would be allowable if rewritten in independent form incorporating all limitations from the base claim and any intervening claims. As noted above, claim 121 is believed to be allowable over the cited reference. As such, claims 121, 123, 124, and 126-128 are each believed to be in condition for allowance.

In paragraph 6 of the Final Office Action, the Examiner noted that claims 130-132 are allowed.

Reexamination and reconsideration are respectfully requested. It is respectfully submitted that all pending claims are in condition for allowance. Issuance of a Notice of Allowance in due course is requested. If a telephone conference might be of assistance, please contact the undersigned attorney at (612) 677-9050.

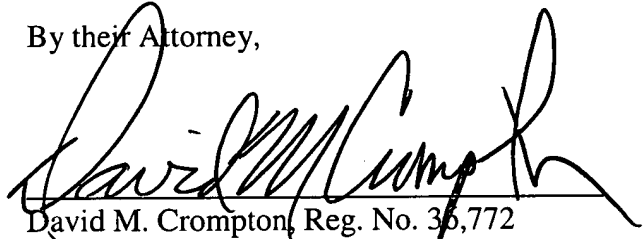
Respectfully submitted,

Gust H. Bardy et al.

By their Attorney,

Date: \_\_\_\_\_

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